

## [The Exhibitor Link](#)

Link from the Exhibit floor plan to your home page!

### Winter Seminar 2019

The official *New Jersey Association for Justice, Inc.* web site, [www.nj-justice.org](http://www.nj-justice.org), is an important resource for our members. The site contains our membership and legislative directories, briefs, forms, calendar of events and much more.

Information on upcoming trade shows can be found under the *Advertise* link. The floor plans for our Winter Seminar 2019 may be viewed with the participating companies' names listed on each diagram within their respective booths. *Exhibitor Link* allows the New Jersey Association for Justice, Inc. members to see exactly who is exhibiting and go immediately to a company's web site at the click of a button. The *Exhibitor Link* is purchased per event and can currently be viewed at the NJAJ homepage to see how it works.

To purchase an *Exhibitor Link* on [www.nj-justice.org](http://www.nj-justice.org), please complete this agreement and return it along with payment to the New Jersey Association for Justice, Inc. Once we receive the signed contract and payment, your own *Exhibitor Link* will be activated for the specific event purchased.

**Life of your link:**

Date of purchase  
through October 2019

**Exhibitor Link Pricing:**

Purchasing (please check box if  
purchasing)  
\$175.00     

### **Exhibitor Link Agreement**

\_\_\_\_\_ agrees to purchase and the New Jersey Association for Justice, Inc. agrees to provide on  
*Initial* the terms and conditions referenced above.

\_\_\_\_\_ agrees to hold the New Jersey Association for Justice, Inc. and its webmaster harmless  
*Initial* from any claims resulting from the use of your services which damages you or another party.

\_\_\_\_\_ acknowledges having read this agreement, understands it and agrees to all the terms  
*Initial* and conditions herein.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

### **Exhibitor Link Form**

URL TO DIRECT LINK: www. \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ FAX: \_\_\_\_\_

NAME OF CONTACT: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

Method of payment:  Check  Visa  MasterCard  Discover  American Express

CARD NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

NAME ON CREDIT CARD: \_\_\_\_\_ AMOUNT TO BE CHARGED: \_\_\_\_\_

ENCLOSED IS OUR CHECK IN THE AMOUNT OF: \_\_\_\_\_

NAME (PRINT): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_